

**AHCCCS****Transplant Outlier Payment Calculation (all types)**

Date

Facility Name &amp; AHCCCS Provider ID#

Health Plan or Program Contractor ID #

Member Name &amp; AHCCCS ID #

RI Case Type &amp; RI Case #

Gray cells = input necessary

Total Stage Billed Charges for Case	Billed Charges Total (Including Denied/Non-covered Charges)
Include all Denied/Non-Covered Charges in Stage Totals <sup>1</sup>	
Unrelated Donor Search	-
Donor Related Search	-
<b>MANUALLY ENTER THE TOTAL BILLED CHARGES FOR EACH PAID STAGE - Including Denied/Non-covered Charges (Only those stages that the Contractor submitted for reinsurance reimbursement that are paid (PY status) or processed (PR) for payment may be included)</b>	
Donor Related Harvest	-
Cord Blood Procurement	
Prep & Transplant	
Convalescent 1-30	
Convalescent 31-60	
Total Billed Charges: (Formula is the Sum of Cells C14 - C20)	

Outlier Stage Calculation	Calculation
1. Total Billed Charges	Formula is equal to Cell C21
2. Cord Blood Procurement	Formula is equal to Cell C17
3. Denied/Non-covered Charges	Manually enter Total Non-covered/Denied Charges (Excluding OPFS non-payable charges)
4. Outlier Threshold Amount (Refer to Transplant Type Contract)	Manually enter Outlier Threshold Amount for Case Type found in Transplant Contract in the Reinsurance section of AHCCCS website
5. Charges above Outlier Threshold	Formula calculates Total Billed charges minus Cord Blood, minus Denied/Non-Covered Charges and minus Outlier Threshold - If this amount is above 0, the case is eligible for Outlier Reimbursement
6. Charges above threshold at 50%	Formula is Cell D31 times 50%
7. Add completed component contracted rate/in PY or PR status(Excluding cord blood pass through)	Manually Enter the Total Contracted Payments from the PMMIS RI113 Screen excluding the Cord Blood Procurement Payment
8. Total payment to Transplant Services Contractor	Formula is Sum of Cells D32 - D33 -- this amount equals the Case Value on the RI110
9. Cord Blood Pass Through in a PR or PY status	Manually Enter the Override Amount of the Cord Blood Procurement from the RI113 Screen
	Total Payment
	lesser of, component contracted rate or Contractor payment (including amount of reimbursement for cord blood pass-through)
	-
	Formula is Sum of Cells D34 - D35
	Enter whichever is less, contracted rate or contractor payment including the amount of reimbursement for the cord blood pass through
	Formula is Cell D36 minus D37
	Total Due
	-

Documentation must support total billed charges submitted.

<sup>1</sup> Effective 10/01/2014 Transplant Evaluation Stage Billed Charges are not covered